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PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| | | |
|---|--|-------------------------------------|
| UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) | Attorney Docket No. | 071308.0432 |
| | First Inventor or Application Identifier | Stephan Bolz |
| | Title | Device for Determining the Internal |
| | Express Mail Label No. | EV339223007 |

| | |
|--|---|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 |
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) | 5. <input type="checkbox"/> Microfiche Computer Program (Appendix) |
| 2. <input checked="" type="checkbox"/> Specification [Total Pages 19] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure | 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3] | ACCOMPANYING APPLICATION PARTS |
| 4. Oath or Declaration [Total Pages] <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). | 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| | 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney |
| | 9. <input type="checkbox"/> English Translation Document (if applicable) |
| | 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations |
| | 11. <input type="checkbox"/> Preliminary Amendment |
| | 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) |
| | 13. <input type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired. (PTO/SB/09-12) |
| | 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) |
| | 15. <input type="checkbox"/> Other: _____ |

*** NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)**

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: PCT / DE02/00081

Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

| | | |
|--|---|---|
| <input type="checkbox"/> Customer Number or Bar Code Label | (Insert Customer No. or Attach bar code label here) | or <input checked="" type="checkbox"/> Correspondence address below |
| Name | Baker Botts L.L.P. | |
| Address | 910 Louisiana Street | |
| City | Houston | State Texas Zip Code 77002-4995 |
| Country | USA | Telephone 713-229-1234 Fax 713-229-1522 |

| | | | |
|-------------------|----------------------------|-----------------------------------|--------------|
| Name (Print/Type) | Bruce W. Slayden II | Registration No. (Attorney/Agent) | 33,790 |
| Signature | <i>Bruce W. Slayden II</i> | Date | July 9, 2003 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

17638 U.S. PTO
07/09/03

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known

| | |
|----------------------|--------------|
| Application Number | |
| Filing Date | July 9, 2003 |
| First Named Inventor | Stephan Bolz |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | 071308.0432 |

TOTAL AMOUNT OF PAYMENT (\$) 790.00

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | Fee Paid |
|---------------------------|-----------------------|-----------------------|-----------------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |
| Other fee (specify) _____ | | | | | |
| SUBTOTAL (3) (\$) | | | | | 40.00 |

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|------------------------|----------|
| 101 740 | 201 370 | Utility filing fee | 750.00 |
| 106 330 | 206 165 | Design filing fee | |
| 107 510 | 207 255 | Plant filing fee | |
| 108 740 | 208 370 | Reissue filing fee | |
| 114 160 | 214 80 | Provisional filing fee | |
| SUBTOTAL (1) (\$) | | | 750.00 |

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|-------------------|--------------|----------------|----------|
| 13 | -20** = | X | 0.00 |
| 3 | -3** = | X | 0.00 |
| SUBTOTAL (2) (\$) | | | 0.00 |

**or number previously paid, if greater; For Reissues, see above

Large Entity Small Entity

| Fee Code (\$) | Fee Code (\$) | Fee Description | |
|-------------------|---------------|--|------|
| 103 18 | 203 9 | Claims in excess of 20 | |
| 102 84 | 202 42 | Independent claims in excess of 3 | |
| 104 280 | 204 140 | Multiple dependent claim, if not paid | |
| 109 84 | 209 42 | ** Reissue independent claims over original patent | |
| 110 18 | 210 9 | ** Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) (\$) | | | 0.00 |

| | | | |
|-------------------|----------------------------|-----------------------------------|--------------|
| SUBMITTED BY | | Complete (if applicable) | |
| Name (Print/Type) | Bruce W. Slayden II | Registration No. (Attorney/Agent) | 33,790 |
| Signature | <i>Bruce W. Slayden II</i> | Telephone | 713-229-1234 |
| | | Date | July 9, 2003 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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